Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

10694200

CLAIMS AS FILED - PART I (Cotumn 1)							ımn 2)		SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			l)					RATE	FEE	1	RATE	FEE	
FOR				NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS				U minus 20=		. 0			XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS				(minus 3 =		• 0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT									+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter *0* in column							column 2		TOTAL		OR	TOTAL	
2118105 (Column 1) (Column 2) (Column 3)								· }	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAI REMAI AFTI AMENDI	NING R		PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 2	-	Minus	-2	ن د	•		X\$ 9=		OR	X\$18=	·
	Independent	• (Minus	••• 3	5	<u> -</u>		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+145=		OR	+290=	
									TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		REMAII AFTE AMENDI	ing R	·	HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• //	<i>'</i>	Minus	-2	0	-] [X\$ 9=		OR	X\$18=	. —
	Independent	• /		Minus	••• (3		11	X43=		OR	X86=	1
	FIRST PRESE	NTATION	OF ML	ILTIPLE D	EPENDENT	CLAIM	- 4.	1	+145=		OR	+290=	1
								L	. TOTAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	·	CLAII REMAIN AFTE AMENDI	ing R		HIGHE NUME PREVIO PAID E	LER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	••				X\$ 9=		OR	X\$18≎	
	Independent	•		Minus	ste			11	X43=		OR	X86=	
Ц	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL					CLAIM	باللي	1					
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290= TOTAL	
	f the "Highest Nur If the "Highest Nur The "Highest Nur	nber Previo	usly Pa usly Pa	by For IN TI by For IN T	HIS SPACE 10 HIS SPACE 1:	less that	n 20, enter "20 n 3, enter "3."		DOTT. FEE		OR ,	ADDIT. FEE	
	ing rughtstrom			(1000)						• •			